

Provider Inspection Summary

For the period 06/01/2003 to 05/31/2006
Community Based Residential Facility
CLASS CNA (NONAMBULATORY)

Facility Information

Facility Name: BLUFFVIEW MEADOWS (110496)

Address: S7559 US HWY 12, NORTH FREEDOM, WI 53951

License Status: REGULAR

Licensed/Certified/Registered 09/01/1996

Regional Office: SOUTHERN REGION (MADISON), (608) 243-2370

Survey History

Survey ID: 0092912 **End Date:** 06/21/2004 **Type:** STANDARD **Purpose:** SURVEY/COMPLAINT/SELF REPORT

Results: ENFORCEMENT ACTION

Statement of Deficiency: #10008022 Served 07/15/2004

<u>Deficiencies Cited</u>	<u>Subject Area</u>	<u>Compliance Verified</u>	<u>Corrected</u>
83.33(3)(e)2.b	INJECTIONS	06/07/2006	Yes
83.42(6)(a)1	ANNUAL INSPECTION BY FIRE DEPARTMENT	06/07/2006	Yes

Disclaimer: This information is provided as a public service by the Wisconsin Department of Health and Family Services (DHFS). The Department neither endorses any facility nor guarantees that this information is accurate, up-to-date, or complete. This information, which should not be used as a sole source in selecting a facility, does not replace official information sources.

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STATE OF WISCONSIN
Bureau of Quality Assurance
P.O. Box 2969
Madison WI 53701-2969

Enforcement History

Date: 07/09/2004 SOD #10008022 Appealed: No

Sanctions

FORFEITURE---83.33(3)(e)2.b

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Complaint History

Date Complaint Received: 05/06/2004

Date Investigation Completed: 06/22/2004

Subject Area(s)

SUPERVISION
PHYSICAL PLANTS & SAFETY HAZARDS
MEDICATIONS
ADMINISTRATION

Result

NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED
NOT SUBSTANTIATED

SOD #

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